



**ACKNOWLEDGEMENT OF NOTIFICATION  
OF HAZARDOUS WASTE ACTIVITY  
(VERIFICATION)**

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

NJD002141711

INSTALLATION ADDRESS

JOHN L ARMITAGE & CO  
245 THOMAS STREET  
NEWARK

NJ 07114

245 THOMAS STREET  
NEWARK

NJ 07114



State of New Jersey

DEPARTMENT OF ENVIRONMENTAL PROTECTION

DIVISION OF WASTE MANAGEMENT

32 E. Hanover St., CN 027, Trenton, N.J. 08625

MARWAN M. SADAT, P.E.  
DIRECTOR

November 7, 1983

LINO F. PEREIRA, P.E.  
DEPUTY DIRECTOR

Mr. Hugh S. Fairman  
John L. Armitage and Company  
245 Thomas Street  
Newark, NJ 07114

RE: TSD Facility Status of John L. Armitage and Company, Newark,  
Essex County, EPAID NO. NJD002141711

Dear Mr. Fairman:

This letter is in response to your letter dated August 11, 1983 in which you requested that John L. Armitage and Company be downgraded from TSD facility status to generator status. In said letter you mentioned that John L. Armitage is involved in the generation of hazardous wastes which are accumulated on-site in containers only for 90 days or less.

The Bureau of Hazardous Waste Engineering has reviewed all correspondence on file for John L. Armitage and has concluded that your facility qualifies solely as a generator, subject to compliance with the following requirements of N.J.A.C. 7:26-9.3 and 40 CFR 262.34:

1. All such waste is, within 90 days or less, shipped off-site to an authorized facility or placed in an on-site authorized facility, as defined at N.J.A.C. 7:26-1.4.
2. The waste is placed in containers which meet the standards of N.J.A.C. 7:26-7.2 and are managed in accordance with N.J.A.C. 7:26-9.4(d).
3. The date upon which each period of accumulation begins is clearly marked and visible for inspection on each container.
4. The generator complies with the requirements for owners and operators of N.J.A.C. 7:26-9.6 and 9.7 concerning preparedness and prevention, contingency plans and emergency procedures as well as N.J.A.C. 7:26-9.4(g) concerning personnel training.

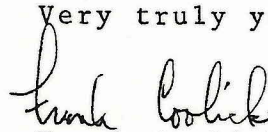
November 7, 1983

This written acknowledgement of the exclusion of the above identified facility from permitting requirements under N.J.A.C. 7:26-1 et seq. is based expressly on the review of the aforementioned correspondence and telephone conversation. This letter makes no claim as to the extent and physical condition of the actual hazardous waste activities occurring at the site mentioned above.

Your company's hazardous waste facility above is no longer included in DEP's list of "existing facilities" (see N.J.A.C. 7:26-1.4 and 12.3) and therefore does not need to conform with the interim operating requirements of N.J.A.C. 7:26-1 et seq. for "existing facilities" which would include the TSD facility annual report. It is the company's responsibility to operate within the conditions listed above. To operate a hazardous waste facility without prior approval from the DEP is a violation of the Solid Waste Managment Act N.J.S.A. 13:1E-1 et seq.

If you have any questions on this matter, please contact Mr. Angel Chang of my staff at (609) 292-8129.

Very truly yours,



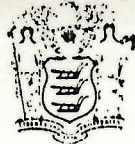
Frank Coolick, Chief  
Bureau of Hazardous Waste Engineering

EP10/ch

c: Joel Columbek  
USEPA, Region II

Dr. David Leu  
DWM - BHWCM





State of New Jersey

DEPARTMENT OF ENVIRONMENTAL PROTECTION

DIVISION OF WASTE MANAGEMENT

120 Rt. 156, Yardville, N.J. 08620

JACK STANTON  
DIRECTOR

LINO F. PEREIRA  
DEPUTY DIRECTOR

AUG 09 1983

John L. Armitage and Company  
P.J. Gilmartin  
245 Thomas Street  
Newark, New Jersey 07114

RE: NOTICE OF VIOLATION AND PENALTY SETTLEMENT OFFER  
FAILURE TO ESTABLISH FINANCIAL ASSURANCE FOR  
CLOSURE AND POST-CLOSURE AND TO DEMONSTRATE  
FINANCIAL RESPONSIBILITY FOR CLAIMS  
EPA I.D. #NJDO02141711

Dear Mr. Gilmartin:

Pursuant to the provisions of New Jersey Solid Waste Management Act, N.J.S.A. 13:1E-1, et seq., the Department of Environmental Protection has determined by examination of our files that you violated N.J.A.C. 7:26-9.10(e) and 9.11(c) in that you have failed to establish and/or submit to the Department financial assurance for closure and post-closure of the facility, and N.J.A.C. 7:26-9.13 in that you have failed to demonstrate financial responsibility for claims arising from the operations of your facility for sudden or non-sudden and accidental occurrences that cause injury to persons or property.

NOW, THEREFORE, YOU ARE HEREBY NOTIFIED that your facility shall submit the required documents within thirty (30) days of receipt of this Notice to: Frank Coolick, Bureau of Hazardous Waste Engineering, 32 East Hanover Street, Trenton, New Jersey 08625.

Further, N.J.S.A. 13:1E-9c provides for maximum civil penalties of \$25,000 per day for violations of this nature. In accordance with N.J.S.A. 13:1E-9d, the Department is amenable to compromise and settle this statutory claim for penalties for the aforementioned violations for the sum of \$2,000.

Should you decide to accept this Penalty Settlement Offer, payment must be made within thirty (30) days of your receipt of this letter. Only checks or money orders drawn to the New Jersey Department of Environmental Protection will be accepted.



Should you decide not to accept this Penalty Settlement Offer or fail to forward payment within thirty (30) days of receipt of this letter, this offer is rescinded and this matter will be referred to the Office of the Attorney General for the initiation of litigation seeking the full penalties allowed by law.

Acceptance of this Penalty Settlement Offer does not relieve you from immediately complying with the sections of the New Jersey Administrative Code cited above. Each day the violation continues shall be considered a separate violation subject to penalties of up to \$25,000 per day.

If you have questions regarding this Notice of Violation and Penalty Settlement Offer, please call the Bureau of Compliance and Enforcement at (609) 292-0967. If you have questions regarding the documents to be submitted, please call the Bureau of Hazardous Waste Engineering at (609) 292-9880.

Date:

August 8, 1983

Joseph A. Rogalski  
Joseph A. Rogalski  
Assistant Director

DJS:kas



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

MAY 26 1983

REGION II  
26 FEDERAL PLAZA  
NEW YORK, NEW YORK 10278

MAY 26 1983

Mr. George Tyler  
Assistant Commissioner for  
Environmental Management and Control  
New Jersey Department of  
Environmental Protection  
Labor and Industry Building, Room 805  
P.O. Box CN 402  
Trenton, New Jersey 08625

Dear Mr. Tyler:

On January 31, 1983, the Environmental Protection Agency (EPA) Region II sent 302 warning letters (sample copies enclosed) to owners and operators of hazardous waste facilities which were not in compliance with EPA's financial responsibility regulations. These regulations became effective in July 1982 and required facilities to demonstrate that funds are available for:

- ° meeting their obligations under the Resource Conservation and Recovery Act (RCRA) for proper closure and post-closure care of their facilities (i.e., "financial assurance"); and
- ° compensating others for bodily injury or property damage caused by accidents arising from operations of the facilities (i.e., "liability insurance").

The following is to summarize industry's compliance to date (or lack thereof) with the Federal financial responsibility regulations. See the enclosed computer printout for a listing of the facilities in compliance with the Federal regulations. Also enclosed is a listing of the facilities within each non-compliance category.

- ° Number of facilities which have submitted all required documents (including those facilities that have utilized the financial test and corporate guarantee methods of compliance) - 279
- ° Number of facilities which demonstrated financial assurance only - 10

- ° Number of facilities which demonstrated liability insurance only - 28
- ° Number of "non-submitters" (excluding facilities which either closed or requested to be declassified as hazardous waste facilities) - 56

The above numbers indicate that 94 facilities are in violation of the Federal and State financial responsibility requirements. Our concern is whether the State or EPA should proceed with enforcement follow-up activities for these 94 facilities. The State's financial regulations, which have been in effect since October 1981, are even more stringent than the Federal regulations in that they do not provide facilities with the option of using the corporate guarantee or the financial test for demonstrating proof of financial assurance and liability insurance. Two hundred and thirty facilities have utilized these alternative methods (see the enclosed computer printout for a listing of facilities which employed these methods). Now that New Jersey has received Phase I interim authorization, the State is responsible for enforcing financial regulations in lieu of EPA. However, the Phase I Memorandum of Agreement (MOA) does provide that EPA can initiate enforcement actions in cases where the State does not initiate timely and appropriate enforcement actions against violators. Regardless of which Agency takes the lead, enforcement actions must be based on the State's financial regulations (see enclosed EPA guidance on enforcement actions in authorized States).

Please notify me within the next two weeks as to the State's plan of action (including time frames) for conducting follow-up enforcement activities for the 94 facilities identified in the enclosure. (Of course, some of these facilities may have already provided the State with financial documentation pursuant to State regulations and would therefore not be considered enforcement candidates by New Jersey.) My staff and I are ready to provide assistance to New Jersey in implementing this high priority portion of the State's Phase I hazardous waste program. Alternatively, if the State chooses not to take the enforcement lead at this time, EPA is ready to proceed with initiating said enforcement actions and will keep New Jersey informed of its activities.



Your cooperation on this matter is appreciated.

Sincerely yours,



Conrad Simon  
Director  
Air & Waste Management Division

Enclosures

cc: Michael DeBonis  
Asst. Director for Planning  
and Resource Recovery, NJDEP (w/o encl.)

PNC

N.J. Facilities Which Submitted  
No Financial Instruments  
(total -- 56)

<u>EPA I.D. No.</u>	<u>Name</u>	<u>City</u>
NJD000316778	Princeton Biomedix	West Windsor Township
NJD000540062	Jersey Smelting & Refining	Jersey City
NJD000632240	Cylinder Maintenance Corp.	Kearny
NJD000692350	PNC Inc.	Mutley
NJD000692467	Interchemical Petroleum Corp- Eastern Inc.	Little Ferry
NJDC00694307	Quanta Resources Corporation	Edgewater
NJD000765123	Polarose Manufacturing Co., Inc.	Newark
NJD000818518	Ames Rubber Corp. Wantage Plant	Wantage
NJD001394089	Synkote Paint Company	Elmwood Park
NJD001915800	James J. Keating Inc.	Perth Amboy
NJD002008118	H & S Chemical Company Inc.	Wallington
<u>NJD002141711</u>	John L. Armitage & Co.	Newark
NJD002141950	CP Chemicals Inc.	Sewaren
NJD002147643	Precision Resistor Co., Inc.	Hillside
NJD002160471	Excel Products Co., Inc.	New Brunswick
NJD002177640	C-D I Dispersions	Newark
NJD002193001	Johanson Manufacturing Corp.	Boonton
NJD002200913	John B. Moore Corporation	South Amboy
NJD002327963	Materials Elec Pds Corp.	Trenton
NJD002344190	United States Bronze Powders	Flemington
NJD002349751	Struthers-Dunn, Inc.	Pitman
NJD002385664	Vineland Chemical	Vineland
NJD002389468	Ames Rubber Corp. Hamburg Plant	Hamburg



<u>EPA I.D. No.</u>	<u>Name</u>	<u>City</u>
NJD002457174	GMC New Departure Hyatt Bearings Clark	Clark
NJD002482545	Viking Yacht Company	New Gretna
NJD002561652	Amax Specialty Metals	Florham Park
NJD002561868	Drew University	Madison
NJD011728656	Keystone Metal Finishers, Inc.	Secaucus
NJD012888525	Middletown Leather Co., Inc.	Hackettstown
NJD044081222	Hummel Chemical Company	South Plainfield
NJD044638935	Arsynco, Inc.	Carlstadt
NJD046351268	Sandvik, Inc.	Fair Lawn
NJD049644438	Diamond Aerosol Corporation	Glen Gardner
NJD061347860	Gould Inc. Industrial Battery Div.	Saddle Brook
NJD067362087	Lilly Industrial Coatings, Inc.	Paulsboro
NJD067484923	E L Beth Ltd.	Perth Amboy
NJD068292648	Standard Tank Cleaning Corp.	Bayonne
NJD076056234	BFI Chemical Services, Inc.	Pedricktown
NJD077091569	Associated Packaging, Inc.	Hurffville
NJD077549772	General Marine Transport Corp.	Bayonne
NJD080602568	Road Building & Construction Co. Inc.	Kearny
NJD081394741	Valmet Processing Corp. of N.J.	Sayreville
NJD087280038	Ideal Plating & Polishing Co., Inc.	Belleville
NJD093846301	Custom Chemicals Company	Elmwood Park
NJD094960333	Presto, Incorporated	Newark
NJD096876438	Tress Chemical Company	Newark
NJD098162704	San Juan International	Trenton



<u>EPA I.D. No.</u>	<u>Name</u>	<u>City</u>
NJD98052663	IT Corporation	Edison
NJD980526867	Shielding Technology	Piscataway
NJD980535959	Marko Engraving & Art Corp.	Fairview
NJD980594022	E.L. Beth Ltd.	Edison
NJD980642888	Kelbro, Inc.	Camden
NJD991304148	Viking Terminal Company	Sayreville
NJT000028134	Barone Barrel & Drum Company	Paterson
NJT350011144	Exxon Bayonne Plant	Bayonne
NJT350014585	Campbell Foundry Company	Kearny

N.J. Facilities Which Submitted  
Liability Insurance Only  
(total -- 28)

<u>EPA I.D. No.</u>	<u>Name</u>	<u>City</u>
NJD000304732	Becton Dickinson & Company	E. Rutherford
NJD000310417	Grow Group Inc.,--Dexco Marine Coatings Co.	Pennsauken
NJD000313477	NAPPI Trucking Corp.	Old Bridge Township
NJD000831461	Princeton Circuit Boards, Inc.	Trenton
NJDC01392679	Hemetite Div. Mandet Industries Inc.	Carlstadt
NJDC01399013	Crelite Chemical Coatings Inc.	Irvington
NJDC02137313	Rosson Metals Corporation	Newark
NJD002139145	Flint Ink Corporation	Lodi
NJD002151322	Fairmount Chemical Co., Inc.	Newark
NJD002153067	Fritzsche Dodge & Olcott Inc.	Clifton
NJDC02155443	Cessna Aircraft	Boonton
NJDC02395382	Ingersoll-Rand Company	Phillipsburg
NJD002458342	Sun Chemical Corporation Pigments Div.	Newark
NJD002491116	Deptford Plating Company	Deptford
NJD011394467	Standard T Chemical Co., Inc.	Linden
NJD042793076	Matheson Division Searle Medical Prods.	East Rutherford
NJD042797571	Hackensack Medical Center	Hackensack
NJD044081354	Mellen Chemicals, Inc.	Avenel
NJD046556486	Kinsley's Landfill, Inc.	Deptford
NJD047354832	Accurate Forming Corp.	Hamburg
NJD049143563	Birk Paint Manufacturers, Inc.	Jersey City
NJD049360336	Kir-Bac Inc.	Edison
NJD064981989	B & L Corporation	Newark
NJD079304783	Clay Adams Div. of Becton Dickinson & Co.	Parsippany
NJD030796782	Congoleum Resilient Flooring Div.	Trenton
NJD095873500	Co-Operative Industries	Chester
NJD990753493	Vanguard Research Assoc., Inc.	South Plainfield
NJLC67507368	Westwood Lighting Group, Inc.	Paterson

N.J. Facilities Which Submitted  
Financial Assurance Only  
(total - 10)

<u>EPA I.D. No.</u>	<u>Name</u>	<u>City</u>
NJD000314674	Onyx Division Millmaster Onyx Group	Jersey City
NJD000314682	Lyndal Chemical Division	Lyndhurst
NJD001660786	Datascope Corp.	Oakland
NJD002165371	Inmont Corp. Hawthorne Plant	Hawthorne
NJD002442549	Curtis-Wright	Fairfield
NJD002444958	Inmont Corporation	Middlesex
NJD065815771	Alcan Ingot & Powders	Union
NJD094951258	A. Gross & Company	Newark
NJD095171930	Colonial Printing Ink Company	East Rutherford
NJD095171948	United States Printing Ink	East Rutherford





U.S. ENVIRONMENTAL PROTECTION AGENCY  
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

PLEASE PLACE LABEL IN THIS SPACE

FOR OFFICIAL USE ONLY

COMMENTS

INSTALLATION'S EPA I.D. NUMBER										APPROVED					DATE RECEIVED (yr., mo., & day)				
NJ00214171121															800818				

I. NAME OF INSTALLATION

JOHN L. ARMITAGE & CO.

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

245 THOMAS STREET

CITY OR TOWN

NEWARK

ST.

ZIP CODE

NJ 07114

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

245 THOMAS STREET

CITY OR TOWN

NEWARK

ST.

ZIP CODE

NJ 07114

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

FAIRMAN, HUGH VP

PHONE NO. (area code & no.)

201-344-1000

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

JOHN L. ARMITAGE & CO.

B. TYPE OF OWNERSHIP (enter the appropriate letter into box)

F = FEDERAL  
M = NON-FEDERAL

M

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

☒ A. GENERATION

☐ B. TRANSPORTATION (complete item VII)

☒ C. TREAT/STORE/DISPOSE

☐ D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

☐ A. AIR

☐ B. RAIL

☐ C. HIGHWAY

☐ D. WATER

☐ E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

☒ A. FIRST NOTIFICATION

☐ B. SUBSEQUENT NOTIFICATION (complete item C)

C. INSTALLATION'S EPA I.D. NO.

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.



W	N	J	D	0	0	2	1	4	1	9	1	1	2	1
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

## IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
7	8	9	10	11	12
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
K078	K079				
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
19	20	21	22	23	24
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
25	26	27	28	29	30
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
37	38	39	40	41	42
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
43	44	45	46	47	48
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 + 261.24.)

☐ 1. IGNITABLE  
(D001)

☐ 2. CORROSIVE  
(D002)

☐ 3. REACTIVE  
(D003)

☐ 4. TOXIC  
(D000)

## X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE <i>John L. Armitage</i>	NAME & OFFICIAL TITLE (type or print) JOHN L. ARMITAGE CHAIRMAN	DATE SIGNED date Aug 14 1980
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<b>FORM</b> <b>3</b>	<b>EPA</b>	<b>U.S. ENVIRONMENTAL PROTECTION AGENCY</b> <b>HAZARDOUS WASTE PERMIT APPLICATION</b> Consolidated Permits Program <i>(This information is required under Section 3005 of RCRA.)</i>	<b>I. EPA I.D. NUMBER</b> <div style="border: 1px solid black; padding: 2px;">           NJD0002141711         </div>
<b>RCRA</b>			<div style="border: 1px solid black; padding: 2px;">             31           </div>

**FOR OFFICIAL USE ONLY**

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)

COMMENTS

**II. FIRST OR REVISED APPLICATION**

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

**A. FIRST APPLICATION** (place an "X" below and provide the appropriate date)
☒ **1. EXISTING FACILITY** (See instructions for definition of "existing" facility. Complete item below.)

☐ **2. NEW FACILITY** (Complete item below.)

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)

FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN

**B. REVISED APPLICATION** (place an "X" below and complete Item I above)
☐ **1. FACILITY HAS INTERIM STATUS**
☐ **2. FACILITY HAS A RCRA PERMIT**
**III. PROCESSES - CODES AND DESIGN CAPACITIES**

**A. PROCESS CODE** - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

**B. PROCESS DESIGN CAPACITY** - For each code entered in column A enter the capacity of the process.

1. AMOUNT - Enter the amount.

2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PRO-CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PRO-CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
<b>Storage:</b>			<b>Treatment:</b>		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
TANK	S02	GALLONS OR LITERS	SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS	OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)	T04	GALLONS PER DAY OR LITERS PER DAY
<b>Disposal:</b>					
INJECTION WELL	D79	GALLONS OR LITERS			
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER			
LAND APPLICATION	D81	ACRES OR HECTARES			
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY			
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS			
<b>UNIT OF MEASURE</b>	<b>UNIT OF MEASURE CODE</b>	<b>UNIT OF MEASURE</b>	<b>UNIT OF MEASURE CODE</b>	<b>UNIT OF MEASURE</b>	<b>UNIT OF MEASURE CODE</b>
GALLONS	G	LITERS PER DAY	V	ACRE-FEET	A
LITERS	L	TONS PER HOUR	D	HECTARE-METER	F
CUBIC YARDS	Y	METRIC TONS PER HOUR	W	ACRES	B
CUBIC METERS	C	GALLONS PER HOUR	E	HECTARES	Q
GALLONS PER DAY	U	LITERS PER HOUR	H		

**EXAMPLE FOR COMPLETING ITEM III** (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

<div style="border: 1px solid black; padding: 5px; display: inline-block;">             DUP           </div>									
LINE NUMBER	A. PRO-CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PRO-CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY	FOR OFFICIAL USE ONLY		
		1. AMOUNT (specify)				1. AMOUNT			
		2. UNIT OF MEASURE (enter code)				2. UNIT OF MEASURE (enter code)			
X-1	S 0 2	600		5					
X-2	T 0 3	20		6					
1	S 0 1	30,000		7					
2				8					
3				9					
4				10					



**III. PROCESSES (continued)**

**C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.**

**IV. DESCRIPTION OF HAZARDOUS WASTES**

**A. EPA HAZARDOUS WASTE NUMBER** — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

**B. ESTIMATED ANNUAL QUANTITY** — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

**C. UNIT OF MEASURE** — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE CODE  
POUNDS.....P  
TONS.....T

METRIC UNIT OF MEASURE CODE  
KILOGRAMS.....K  
METRIC TONS.....M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

**D. PROCESSES****1. PROCESS CODES:**

**For listed hazardous waste:** For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

**For non-listed hazardous wastes:** For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

**Note:** Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

**2. PROCESS DESCRIPTION:** If a code is not listed for a process that will be used, describe the process in the space provided on the form.

**NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER** — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.

2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.

3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

**EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below)** — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)				B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES							
	1. PROCESS CODES (enter)						2. PROCESS DESCRIPTION (if a code is not entered in D(1))							
X-1	K	0	5	4	900	P	T	0	3	D	8	0		
X-2	D	0	0	2	400	P	T	0	3	D	8	0		
X-3	D	0	0	1	100	P	T	0	3	D	8	0		
X-4	D	0	0	2									included with above	



**NOTE:** Photocopy this page before completing if you have more than 26 wastes to list.

EPA I.D. NUMBER (enter from page 1)										FOR OFFICIAL USE ONLY									
NJ0002141711										DUP									
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																			
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)				B. ESTIMATED ANNUAL QUANTITY OF WASTE				C. UNIT OF MEASURE (enter code)	D. PROCESSES									
										1. PROCESS CODES (enter)				2. PROCESS DESCRIPTION (if a code is not entered in D(1))					
1	F003				60,000				P	S01									
2																			
3																			
4																			
5																			
6																			
7																			
8																			
9																			
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22																			
23																			
24																			
25																			
26																			



**IV. DESCRIPTION OF HAZARDOUS WASTES (continued)****E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.**

FL:  $\frac{A}{55}$  FL:  $\frac{AA}{56}$

EPA I.D. NO. (enter from page 1)

S	F	N	J	D	0	0	2	1	4	1	7	1	1	3	6
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

**V. FACILITY DRAWING**

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

**VI. PHOTOGRAPHS**

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

**VII. FACILITY GEOGRAPHIC LOCATION**

LATITUDE (degrees, minutes, &amp; seconds)

40 42 55.6 (SSO)

LONGITUDE (degrees, minutes, &amp; seconds)

074 10 640 (640)

**VIII. FACILITY OWNER**☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code &amp; no.)

17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35
----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55
----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----

**IX. OWNER CERTIFICATION**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

HUGH S. FAIRMAN V-P

B. SIGNATURE

Hugh S. Fairman

C. DATE SIGNED

1/14/81

**X. OPERATOR CERTIFICATION**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

HUGH S. FAIRMAN V-P

B. SIGNATURE

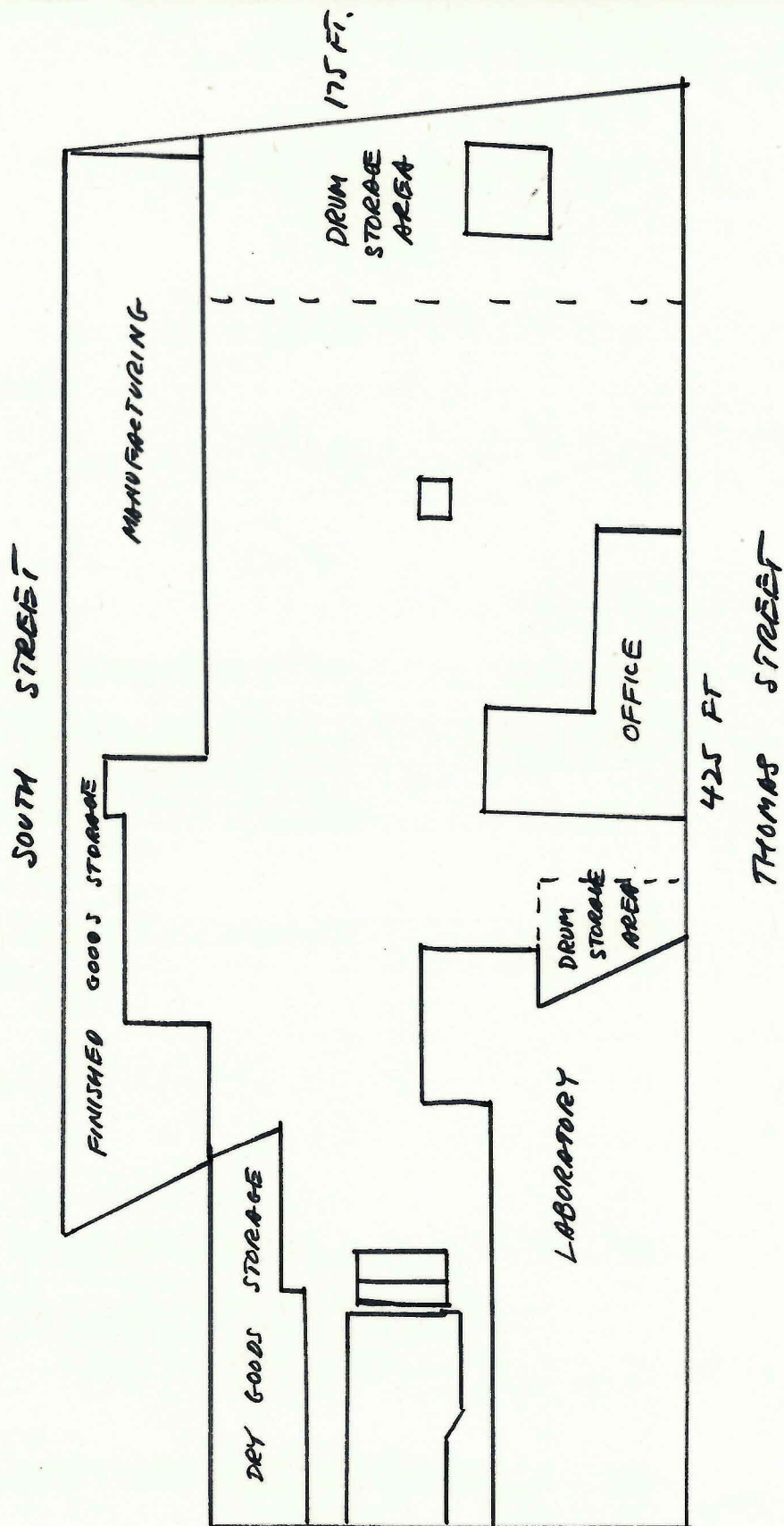
Hugh S. Fairman

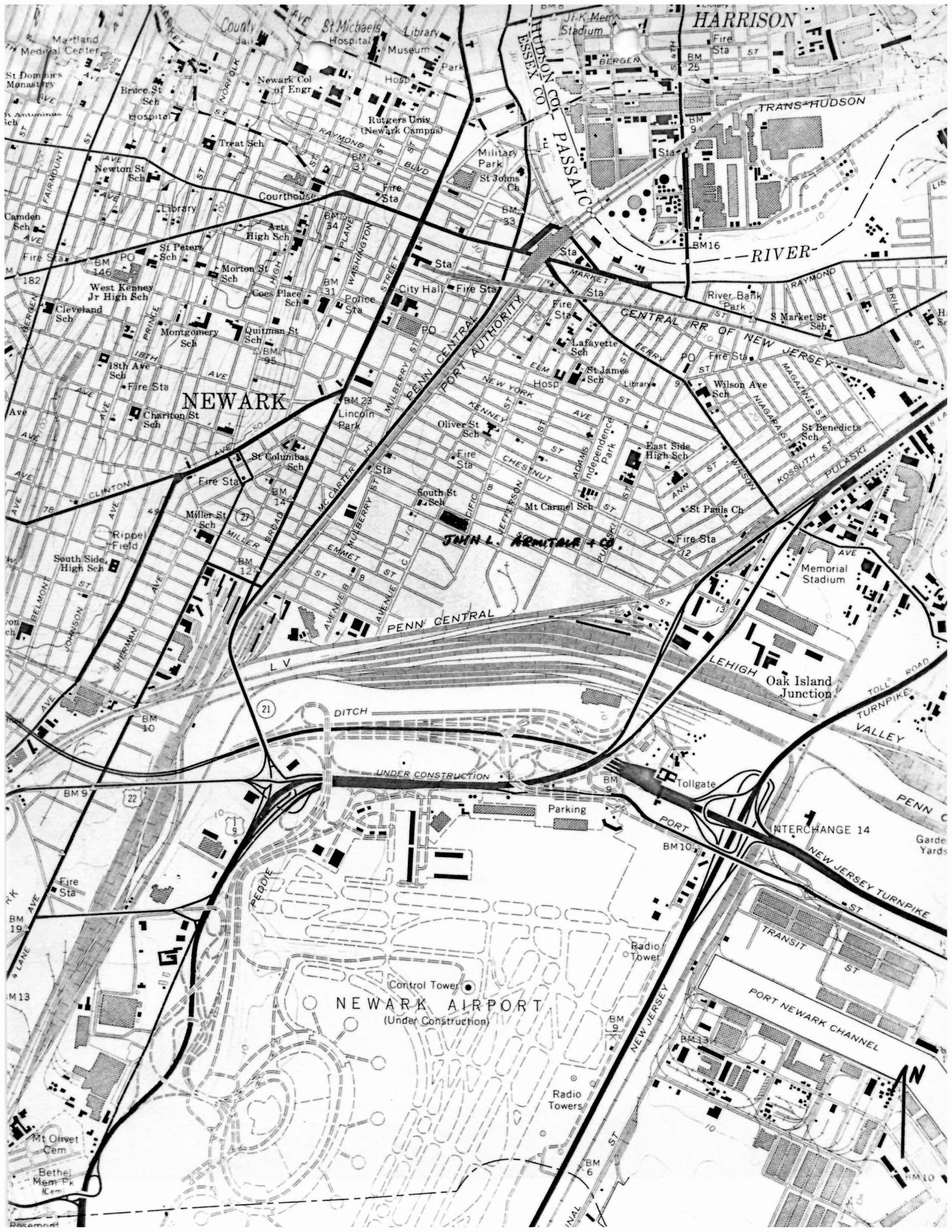
C. DATE SIGNED

1/14/81



V. FACILITY DRAWING (see page 4)







[illegible]

ARMITAGE, JOHN.





*John L. Armitage & Co.*

245 THOMAS STREET, NEWARK, NEW JERSEY 07114 □ 201 344-1000

May 20, 1981

US EPA Region 2  
Information Service Center  
26 Federal Plaza  
New York, NY 10278

Attn: Herman Phillips

Dear Mr. Phillips,

Sometime ago your office requested our Standard Industrial Code number and a photograph of our hazardous waste storage area at our Newark facility. The code number was telephoned in several weeks ago and our photo is now enclosed so that you may continue the processing of our application.

P.J. Gilmartin  
General Manager





FORM 1 GENERAL		ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION Consolidated Permits Program (Read the "General Instructions" before starting.)		I. EPA I.D. NUMBER NJ D002141711	
LABEL ITEMS				GENERAL INSTRUCTIONS	
I. EPA I.D. NUMBER				If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.	
III. FACILITY NAME		NJ D002141711			
V. FACILITY MAILING ADDRESS		JOHN L. ARMITAGE & CO. 245 THOMAS ST. NEWARK, N.J. 07114			
VI. FACILITY LOCATION					

## II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK 'X'			SPECIFIC QUESTIONS	MARK 'X'		
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		X	F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

## III. NAME OF FACILITY

1	SKIP	JOHN L. ARMITAGE & CO.
---	------	------------------------

## IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)		B. PHONE (area code & no.)	
2	P. J. GILMARTIN	201	344 1000

## V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX	
3	245 THOMAS ST.
B. CITY OR TOWN	
4	NEWARK, N.J.
C. STATE	
NJ	
D. ZIP CODE	
07114	

## VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER	
5	245 THOMAS ST.
B. COUNTY NAME	
ESSEX	
C. CITY OR TOWN	
6	NEWARK
D. STATE	
NJ	
E. ZIP CODE	
07114	
F. COUNTY CODE (if known)	



CONTINUED FROM THE FRONT

## VII. SIC CODES (4-digit, in order of priority)

A. FIRST										B. SECOND											
7										(specify)	7										(specify)
15	16	17	18	19	20	21	22	23	24		15	16	17	18	19	20	21	22	23	24	
C. THIRD										D. FOURTH											
7										(specify)	7										(specify)
15	16	17	18	19	20	21	22	23	24		15	16	17	18	19	20	21	22	23	24	

## VIII. OPERATOR INFORMATION

A. NAME										B. Is the name listed in Item VIII-A also the owner?									
JOHN L. ARMITAGE & CO.										<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO									
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)										D. PHONE (area code & no.)									
F = FEDERAL S = STATE P = PRIVATE M = PUBLIC (other than federal or state) O = OTHER (specify)										P (specify) 201 344 1000									
E. STREET OR P.O. BOX																			
245 THOMAS ST.																			
F. CITY OR TOWN										G. STATE		H. ZIP CODE		IX. INDIAN LAND					
NEWARK										NJ		07114		Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					

## X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)										D. PSD (Air Emissions from Proposed Sources)									
9	N									9	P								
15	16	17	18	19	20	21	22	23	24	15	16	17	18	19	20	21	22	23	24
B. UIC (Underground Injection of Fluids)										E. OTHER (specify)									
9	U									(specify)									
15	16	17	18	19	20	21	22	23	24										
C. RCRA (Hazardous Wastes)										E. OTHER (specify)									
9	R									(specify)									
15	16	17	18	19	20	21	22	23	24										

## XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

## XII. NATURE OF BUSINESS (provide a brief description)

INDUSTRIAL PAINT MANUFACTURING

NEW YORK, N.Y. 10007  
 JAN 19 3 08 PM '81  
 ENVIRONMENTAL PROTECTION AGENCY  
 NEW YORK, N.Y. 10007

F9: A/SI

PERMIT TO DISCHARGE  
 JAN 19 3 08 PM '81  
 ENVIRONMENTAL PROTECTION AGENCY  
 NEW YORK, N.Y. 10007

## XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)										B. SIGNATURE										C. DATE SIGNED									
HUGH S. FAIRMAN, V-P.										Hugh S. Fairman										1/14/81									

## COMMENTS FOR OFFICIAL USE ONLY


# FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

Report run on: June 19, 2015 - 10:14 AM

Version 5.0

## User Selection Criteria

<b>Location:</b>	New Jersey, all activities	<b>Activity Location:</b>	None Chosen
<b>Handler ID:</b>	NJD002141711	<b>Group of IDs:</b>	None Chosen
<b>Handler Name:</b>			
<b>Handler Universe:</b>	All Facilities Regardless of Universe		
<b>Determined Date Range:</b>	From: 10/01/1980 To: 06/19/2015		
<b>Location County Code:</b>	None Chosen	<b>Evaluation Type:</b>	
<b>Location City:</b>		<b>Focus Area:</b>	
<b>Location Zip Code:</b>		<b>Violation Type:</b>	
<b>State District:</b>	None Chosen	<b>Display Code Descrip.:</b>	Yes
<b>Sort Order:</b>	Region, State, Handler Name	<b>Display Universes:</b>	Yes

## Results

Data meeting the criteria you selected follows.

Total Pages:4      Total Handlers:1

## Report Description

This report presents available information from the Resource Conservation and Recovery Act Information System (RCRAInfo) about compliance evaluations, violations, and enforcement actions meeting the criteria supplied by the user. Evaluations showing no violations does not always indicate that no violations were determined. Violation without enforcement actions does not always mean no enforcement action will be issued. In order to avoid releasing enforcement sensitive information to the public the following information is not shown on the report: pending civil / judicial referrals, criminal actions and referrals, and State to EPA referrals; all other enforcement actions are released.

## Report Information

Name: cme\_foia.rdf  
Developed by: EPA Headquarters, Office of Enforcement and Compliance Assurance  
Deployed: June 2006  
Last Updated: May 2012  
Contact: rcrainfo.help@epa.gov  
Tables Used: cmecomp3, ccitation3, hreport\_univ5, lu\_citation, lu\_state, hid\_groups  
Libraries: none



# FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

Report run on: June 19, 2015 - 10:14 AM

Page 3

## Description of codes used on the report:

Universes	Description of Universes
<b>Generator</b>	Indicates that the facility is a Large Quantity Generator (LQG), Small Quantity Generator (SQG), Conditionally Exempt Small Quantity Generator (CEG), or not a generator (N).
<b>Transporter</b>	Indicates that the facility Transports waste subject to RCRA regulations. ('Y' indicates that the facility is in this universe).
<b>Operating TSDF</b>	Indicates that the facility is a Treatment, Storage or Disposal facility subject to any type of enforcement. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
<b>IC in Place</b>	Indicates that the facility has Institutional Controls in place. ('Y' indicates that the facility is in this universe).
<b>EI Indicator (HE / GW)</b>	Indicates that the facility has controls in place for Environmental Indicators. HE - Human Exposures ('+' indicates the exposure exists and is under control; '-' indicates the exposure exists and is not under control; 'N' indicates the exposure does not exist) GW - Groundwater Release ('+' indicates the exposure exists and is under control; '-' indicates the exposure exists and is not under control; 'N' indicates the exposure does not exist)
<b>Short-Term Gen</b>	Indicates that the facility is a short term or one time event generator and not generating from ongoing processes.
<b>Transfer Facility</b>	Indicates that the facility transfers hazardous waste.
<b>Offsite Receiver</b>	Indicates that the facility, whether public or private, currently accepts hazardous waste from another site (site identified by a different EPA ID).
<b>HSM</b>	Indicates that the facility manages hazardous secondary material(s) (e.g. spent material, by-product or sludge) that when discarded, would be identified as hazardous waste.
<b>Subpart K</b>	Indicates that the facility has opted into the subpart K laboratory rule. It then specifies the type of facility (C - College or University; H - Teaching Hospital; N - Non-profit Research Institute; W - withdrawal from the rule)
<b>Full Enforcement</b>	Indicates that the facility is a Treatment, Storage or Disposal facility which is part of the Full Enforcement universe. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
<b>CA Workload</b>	Indicates that the facility is part of the Corrective Action Workload universe. ('Y' indicates that the facility is in this universe).
<b>Active State Gen</b>	Indicates that the facility is an Active State Generator. ('Y' indicates that the facility is in this universe).
<b>Converter</b>	Indicates that the facility is a Converter Treatment, Storage or Disposal facility. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
<b>State TSDF</b>	Indicates that the facility is a State Treatment, Storage or Disposal facility. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
<b>State Unaddressed SNC</b>	Indicates that the facility is a State Unaddressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
<b>State Addressed SNC</b>	Indicates that the facility is a State Addressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
<b>State SNC w/ Compl. Sched</b>	Indicates that the facility is a State Significant Non-Complier with a Compliance Schedule. ('Y' indicates that the facility is in this universe).
<b>EPA Unaddressed SNC</b>	Indicates that the facility is an EPA Unaddressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
<b>EPA Addressed SNC</b>	Indicates that the facility is an EPA Addressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
<b>EPA SNC w/ Compl. Sched</b>	Indicates that the facility is a EPA Significant Non-Complier with a Compliance Schedule. ('Y' indicates that the facility is in this universe).

\* Note: Penalty amount may not reflect all violations cited.